FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

				r loade read ii	ion donor to bot	ore complete	ng and for the	acc regarding	poblic bardo							
SECTION 1 - General Information																
1. Name and Mailing Address of Respondent CTC Telecom, Inc. P.O. Box 69 Cambridge, ID 83610													Check here if this is a change of address.			
F			Period (End overed by Re 15, 201		у		Reporting	of Full-Time Er Period (check wer than 16 (com			_					
SECTION II - Full-Time Employee	s.															
		Number of Employees (Report employees in only one category)														
		Race/Ethnicity														
Job Categories	Hisp	Hispanic or Not-Hispanic or Latino														
	La	atino			Ma	ale				Female					Total Columns A - N	
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races		
	А	В	С	D	Е	F	G	н	£	J	К	L	М	N	0	
Executive/Senior Level Officials and Managers																
First/Mid-Level Officials and Managers 1.2																
Professionals 2																
Technicians 3																
Sales Workers 4																
Administrative Support Workers																
Craft Workers 6																
Operatives 7																
Laborers and Helpers 8																
Service Workers 9																
TOTAL 10																
PREVIOUS YEAR TOTAL 11																

SECTION III - Part-Time Empl	ovees.																
Job Categories		Number of Employees (Report employees in only one category)															
		Race/Ethnicity															
	F	Hispanic or Latino		Not-Hispanic or Latino													
					M	ale				Female							
	Male		White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian F∴	American Indían or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	0		
																Executive/Senior Level Officials and Managers	1,1
First/Mid-Level Officials and Managers	1,2																
Professionals	2																
Technicians	3																
Sales Workers	4																
Administrative Support Workers	5																
Craft Workers	6																
Operatives	7																
Laborers and Helpers	8																
Service Workers	9																
TOTAL	10																
PREVIOUS YEAR TOTAL	11								97								
SECTION IV - Report of Discri	imination Co	mplaints Pursua	ant to 47 CFF	R 22.321, 23.5	55, 90.168, 10°	1.4, and 101	.311.						>1				
This is to advise th company before ar	ny bod <mark>y ha</mark> vin ne Commissio	g competent juris n that the followin	sdiction in suc ng complaints	ch matters dur alleging viola	ing the calend itions of the pr	ar year cove ovisions of a	red by this rep ny equal empl	oort. oyment oppor	tunity statute	have been fil	ed against thi	s company.					
(Attach a list indica	ating parties in	volved, date filed	i, courts or ag	gencies before	e which the ma	atter has bee	n neard, file n	umber or othe	r designation	, and current	status or disp	osition.					
I certify that to the best of my kr	nowledge, info	rmation, and beli	ief, all statem	ents in this re	port are true a	nd correct.											
		ed or Printed Name of Person Signing Signature Telephone No.															
	Jerrold	D. Piper		WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION													
Title of Person Signing Operations Manager				OF ANY ST	FALSE STAT ATION LICENS	EMENTS M SE OR CON	ADE ON THIS STRUCTION	FORM ARE F PERMIT (47 U	UNISHABLE J.S.C. 312 (A	E BY FINE AN (1) AND/OR	ID/OR IMPRIS FORFEITURI	SONMENT (1 E (47 U.S.C. :	8 U.S.C. 100 503)	1) AND/OR R	EVOCATION		